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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Nicole First name  Nyree Middle name  Burden Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5572	

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Case number (if known)

Debtor 1 Nicole Nyree Burden

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and		■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)			
	doing business as names					
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		1250 E. 169th Place South Holland, IL 60473				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
5.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Document Case number (if known) Debtor 1 Nicole Nyree Burden

Par	The chanton of the	Charler	no /F!	rial description of sock as a	latio- D-	autrodby: 44 II O	C 5 242/b) for local state	uolo Filing for Danier	
7.	The chapter of the Bankruptcy Code you are choosing to file under			rief description of each, see A go to the top of page 1 and ch			C. § 342(b) for Individu	uals Filing for Bankruptcy	
		Chap	oter 7						
		☐ Chapter 11							
		☐ Chapter 12							
		☐ Chap	oter 13						
8.	How you will pay the fee	ab ord	out how yo	entire fee when I file my pe u may pay. Typically, if you ar attorney is submitting your pa address.	e paying	the fee yourself, y	you may pay with cash	n, cashier's check, or money	
				the fee in installments. If you in Installments (Official Form		e this option, sign	and attach the Applica	ation for Individuals to Pay	
			•	t my fee be waived (You may	,	this option only if	vou are filing for Char	oter 7. By law, a judge may.	
		bu ap	t is not requ plies to you	uired to, waive your fee, and noir family size and you are unain to Have the Chapter 7 Filing	nay do so ble to pa	o only if your incor y the fee in install	me is less than 150% oments). If you choose	of the official poverty line that this option, you must fill out	
9.	Have you filed for	□ No.							
	bankruptcy within the last 8 years?	Yes.							
			District	Northern District of Illinois	When	1/17/18	Case number	18-01330	
			District	Northern District of Illinois (Dismissed Ch. 13)	When	5/05/15	Case number	15-16000	
			District	Northern District of Illinois (Dismissed Ch. 13)	When	11/18/14	Case number	14-41668	
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
11.	Do you rent your	■ No.	Go to li	ne 12.					
	residence?	☐ Yes.	Has yo	ur landlord obtained an eviction	n judgm	ent against you?			
				No. Go to line 12.	-	•			
				Yes. Fill out Initial Statement	About ai	n Eviction Judgme	ent Against You (Form	101A) and file it as part of	

Deb	otor 1 Nicole Nyree Bur	den		Document Page 4 of 57  Case number (if known)		
Par	t 3: Report About Any B	usinesses	You Own	as a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP Code		
	it to this petition.		Checi	k the appropriate box to describe your business:		
				Health Care Business (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as defined in 11 U.S.C. § 101(53A))		
				Commodity Broker (as defined in 11 U.S.C. § 101(6))		
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriately approximately a small business debtor, you must attach your most recent balance sheet, statement arations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am r	not filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.	iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am f	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own o	r Have An	y Hazardo	ous Property or Any Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to public health or safety?	□ res.	What is	the hazard?		
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?		

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For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

Where is the property?

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Debtor 1 **Nicole Nyree Burden** 

Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Nicole Nyree Bur	den	Docume	ent Page 6 of 57	f (if known)			
Part	6: Answer These Ques	tions for F	Reporting Purposes					
	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "inci						
	you nave:		□ No. Go to line 16b.	sorial, larrilly, or nouserious purpose.				
			Yes. Go to line 17.					
		16b.		usiness debts? Business debts are debts t	that you incurred to obtain			
		100.		estment or through the operation of the busi				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you o	owe that are not consumer debts or busines	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	I am not filing under Chapter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes.		Do you estimate that after any exempt proporallable to distribute to unsecured creditors?	erty is excluded and administrative expenses			
			■ No					
		I	Yes					
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99	9	<u> </u>	<b>50,001-100,000</b>			
		□ 100- <sup>2</sup>		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	<b>=</b> \$0 - \$	\$50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	<b>□</b> \$50,0	001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	\$50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?	<b>\$</b> 50,	001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Part	t7: Sign Below							
For	you	I have e	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
				r, I am aware that I may proceed, if eligible, elief available under each chapter, and I ch				
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I reques	t relief in accordance with the	chapter of title 11, United States Code, spec	cified in this petition.			
		bankrup and 357	tcy case can result in fines up	, concealing property, or obtaining money o to \$250,000, or imprisonment for up to 20 y	or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519			
		Nicole	ble Nyree Burden Nyree Burden e of Debtor 1	Signature of Debtor	2			

Executed on

MM / DD / YYYY

Executed on April 4, 2018 MM / DD / YYYY

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Debtor 1 Nicole Nyree Burden Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jeffrey L. Benson	Date	April 4, 2018	
Signature of Attorney for Debtor		MM / DD / YYYY	
leffrey I. Bancan 6202720			
Jeffrey L. Benson 6203738			
Printed name			
Law Offices of Jeffrey L. Benson			
Firm name			
3337 W. 95th Street			
Ste. # 2			
Evergreen Park, IL 60805			
Number, Street, City, State & ZIP Code			
Contact phone	Email address		
6203738			
Bar number & State			

		Docume	ent Page 8 of 5	7	
Fill in this infor	mation to identify your	case:			
Debtor 1	Nicole Nyree Bur	den			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
					3

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	22,385.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	22,385.00
Pai	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	18,307.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	7,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	59,435.00
	Your total liabilities	\$	84,742.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,352.02
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,236.04
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Vous debte are primarily concurred debte. Concurred debte are those "incurred by an individual primarily for		Caracita and

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,637.45

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	nim
From Fart 4 on Generalize 27, Gopy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	7,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	3,000.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	10,000.00

		Docume	<u>nt Page 10 of 57</u>		
Fill in this info	ormation to identify your	case and this filing:			
Debtor 1	Nicole Nyree Bu	rden			
200101	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
					_
Case number					☐ Check if this is an amended filing
					arrieriaea ming
Official F	orm 106A/B				
Schedu	le A/B: Prop	nertv			12/15
			nce. If an asset fits in more than o	no optogony liet the peopt in	
hink it fits best.	Be as complete and accurate space is needed, attach	ate as possible. If two married	d people are filing together, both a n. On the top of any additional pag	re equally responsible for su	pplying correct
Part 1: Describ	e Each Residence, Building	g, Land, or Other Real Estate	You Own or Have an Interest In		
Do you own o	r have any legal or equitable	e interest in any residence h	ouilding, land, or similar property?		
. Do you own o	. nave any legal of equitable	o interest in any residence, D	anany, iana, or similar property?		
No. Go to P	Part 2.				
☐ Yes. Where	e is the property?				
Part 2: Describ	e Your Vehicles				
3. Cars, vans,  □ No ■ Yes	trucks, tractors, sport u	tility vehicles, motorcycle	s		
3.1 Make:	Chrysler	Who has an intere	est in the property? Check one	Do not deduct secured clause the amount of any secure	
Model:	200S	■ Debtor 1 only		Creditors Who Have Clair	
Year:	2015	☐ Debtor 2 only		Current value of the	Current value of the
• •	nate mileage:	Debtor 1 and De	ebtor 2 only	entire property?	portion you own?
Other info	ormation:	At least one of t	the debtors and another		
				\$11,700.00	\$11,700.00
		(see instructions)	s community property		411,100100
Examples: Bo  No  Yes  Add the do pages you  Part 3: Describ	pats, trailers, motors, personals, trailers, motors, personals, trailers, motors, personals, person	onal watercraft, fishing vess you own for all of your en . Write that number here	al vehicles, other vehicles, and sels, snowmobiles, motorcycle a sels, snowmobiles, snowmobiles, motorcycle a sels, snowmobiles, sn	y entries for	\$11,700.00
Names and	goods and furnishing			j	Dortion you own?  Do not deduct secured claims or exemptions.
. nousenoid	goods and furnishings				

Examples: Major appliances, furniture, linens, china, kitchenware

■ No

Official Form 106A/B Schedule A/B: Property

D	ebtor 1	Case 18-09930 Nicole Nyree Burden	Doc 1	Filed 04/04/18 Document	Entered 04/04/18 21:47:1 Page 11 of 57 Case number (if kno	1 Desc Main
	_	Describe				
7.	Electror	nics			oment; computers, printers, scanners; mus	sic collections; electronic devices
	□ No ■ Yes.	Describe				
		2 TVs				\$160.00
8.	Example No	bles of value les: Antiques and figurines; p other collections, memo Describe			oks, pictures, or other art objects; stamp, o	coin, or baseball card collections;
9.	Example No	ent for sports and hobbies les: Sports, photographic, ex musical instruments Describe		other hobby equipment;	bicycles, pool tables, golf clubs, skis; cand	oes and kayaks; carpentry tools;
10	■ No	ms  bles: Pistols, rifles, shotguns  Describe	, ammunitior	ı, and related equipmen	t	
11	□ No	oles: Everyday clothes, furs,  Describe	leather coats	s, designer wear, shoes	accessories	
		Clothes	i			\$500.00
12	■ No		ume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, gen	ns, gold, silver
13	Exam <sub>l</sub> ■ No	nrm animals ples: Dogs, cats, birds, horse Describe	es			
14	Any ot ■ No		-	u did not already list, i	ncluding any health aids you did not lis	t
1		the dollar value of all of yo art 3. Write that number he			ny entries for pages you have attached	\$660.00
		escribe Your Financial Assets				
D	o you ov	vn or have any legal or equ	uitable inter	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	■ No	oles: Money you have in you			osit box, and on hand when you file your p	etition

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Case number (if known) Document Debtor 1 Nicole Nyree Burden 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Planitien Credit Union checking account - No \$0.00 balance kept Checking **Planiten Credit Union savings account** \$25.00 17.2. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) 401k - 100% Exempt \$10,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

☐ Yes. Give specific information about them...

Deb	otor 1	Nicole Nyree Burden	Document	Page 13 of 57 Case number (if known)	)
ı	Examp ■ No	-		n holdings, liquor licenses, professional licen	
L	┙Yes.	Give specific information about them			
Mo	ney or <sub>l</sub>	oroperty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
•	No	unds owed to you  Give specific information about them, inclu	uding whether you alre	ady filed the returns and the tax years	
	<i>Examp</i> ■ No	support  oles: Past due or lump sum alimony, spous  Give specific information	al support, child suppo	ort, maintenance, divorce settlement, propert	ry settlement
ı	Examp ■ No	imounts someone owes you iles: Unpaid wages, disability insurance pa benefits; unpaid loans you made to s Give specific information		efits, sick pay, vacation pay, workers' compe	ensation, Social Security
	<i>Examp</i> ∃ No	ts in insurance policies bles: Health, disability, or life insurance; he  Name the insurance company of each pol  Company name:		HSA); credit, homeowner's, or renter's insura Beneficiary:	ance Surrender or refund value:
		Term Life Insura surrender value	nce - No cash		\$0.00
•	If you a someo	erest in property that is due you from sare the beneficiary of a living trust, expect ne has died.  Give specific information		d surance policy, or are currently entitled to red	ceive property because
•	<i>Examp</i> ■ No	against third parties, whether or not your less: Accidents, employment disputes, insure Describe each claim			
	No	contingent and unliquidated claims of e	very nature, includin	g counterclaims of the debtor and rights t	to set off claims
ı	No	ancial assets you did not already list Give specific information			
36.		he dollar value of all of your entries fro art 4. Write that number here			\$10,025.00
Part	5: Des	scribe Any Business-Related Property You O	wn or Have an Interest	n. List any real estate in Part 1.	

Debt	Case 18-099 or 1 Nicole Nyree Bui		Filed 04/04/18 Document	B Entered 0 Page 14 of	4/04/18 21:47:11 57 Case number (if known)	Desc Main	
					odoc namber (# known)	-	
	you own or have any legal o	r equitable interest i	n any business-related	property?			
	No. Go to Part 6.						
Ш	Yes. Go to line 38.						
Part 6	Describe Any Farm- and C If you own or have an interest			wn or Have an Intere	st In.		
46. <b>D</b>	o you own or have any leg	gal or equitable in	terest in any farm- or	· commercial fishi	ng-related property?		
ı	No. Go to Part 7.	-	-				
[	Yes. Go to line 47.						
Part 7	Describe All Property	You Own or Have a	n Interest in That You D	id Not List Above			
<b>=</b>	to you have other property Examples: Season tickets, con No Yes. Give specific information	ountry club membe					
54.	Add the dollar value of all	of your entries fr	om Part 7. Write that	number here			\$0.00
		-					
Part 8	List the Totals of Each	Part of this Form					
55.	Part 1: Total real estate, li	ne 2					\$0.00
	Part 2: Total vehicles, line			\$11,700.00			ψ0.00
	Part 3: Total personal and		, line 15	\$660.00			
	Part 4: Total financial asso		_	\$10,025.00			
59.	Part 5: Total business-rela	ated property, line	± 45	\$0.00			
60.	Part 6: Total farm- and fisl	hing-related prop	erty, line 52	\$0.00			
61.	Part 7: Total other propert	ty not listed, line 5	54 + _	\$0.00			
62.	Total personal property. A	Add lines 56 throug	h 61	\$22,385.00	Copy personal property t	otal <b>\$2</b>	22,385.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$22,385.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Nicole Nyree Bur	den		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
2015 Chrysler 200S Line from Schedule A/B: 3.1	\$11,700.00		\$2,400.00	735 ILCS 5/12-1001(c)
Ellie Holli Schedule A/D. 3.1			100% of fair market value, up to any applicable statutory limit	
2 TVs Line from Schedule A/B: 7.1	\$160.00		\$160.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
Line nom schedule A/D.			100% of fair market value, up to any applicable statutory limit	
Savings: Planiten Credit Union savings account	\$25.00	•	\$25.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
401(k): 401k - 100% Exempt	\$10,000.00	-	\$10,000.00	735 ILCS 5/12-1006
Line nom Schedule A/D. 21.1			100% of fair market value, up to any applicable statutory limit	

Case 18-09930 Doc 1 Filed 04/04/18 Entered 04/04/18 21:47:11 Desc Main Document Page 16 of 57 Nicole Nyree Burden Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Term Life Insurance - No cash** 735 ILCS 5/12-1001(f) \$0.00 100% surrender value Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? 

Yes

	n this information to identify yo	our case:			
Jeb	or 1 Nicole Nyree E	Middle Name Last Name		-	
Deb <sup>.</sup>	or 2				
		Middle Name Last Name		-	
Jnit	ed States Bankruptcy Court for th	e: NORTHERN DISTRICT OF ILLINOIS		_	
300	a number				
				☐ Check	if this is an
				amend	led filing
)ffi	<u>cial Form 106D</u>				
SC	nedule D: Creditor	s Who Have Claims Secured	by Propert	V	12/15
nee	ded, copy the Additional Page, fill i				
. Do	any creditors have claims secured	by your property?			
ı	☐ No. Check this box and submit	this form to the court with your other schedules. Yo	ou have nothing else	to report on this form.	
	_	·	our nave neumig elect		
	Yes. Fill in all of the information	i Delow.			
Part	1: List All Secured Claims		Column A	Column P	Column C
2. Li:	st all secured claims. If a creditor has		Column A	Column B	Column C
2. Lis	st all secured claims. If a creditor has	as a particular claim, list the other creditors in Part 2. As	Column A  Amount of claim  Do not deduct the	Column B  Value of collateral that supports this	Column C Unsecured portion
2. Lis	st all secured claims. If a creditor hat ach claim. If more than one creditor hat as possible, list the claims in alphabe	as a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
2. Li: for ear	st all secured claims. If a creditor has ach claim. If more than one creditor has as possible, list the claims in alphabe  Tidewater Credit	as a particular claim, list the other creditors in Part 2. As atical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. Li: for ear	st all secured claims. If a creditor hat ach claim. If more than one creditor hat as possible, list the claims in alphabe	as a particular claim, list the other creditors in Part 2. As stical order according to the creditor's name.  Describe the property that secures the claim:	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion If any
2. Li: for ear	st all secured claims. If a creditor has ach claim. If more than one creditor has a se possible, list the claims in alphabe Tidewater Credit Services	as a particular claim, list the other creditors in Part 2. As atical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. Listor earnuch	st all secured claims. If a creditor has ach claim. If more than one creditor has a se possible, list the claims in alphabe Tidewater Credit Services	as a particular claim, list the other creditors in Part 2. As stical order according to the creditor's name.  Describe the property that secures the claim:  2015 Chrysler 200S	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. Listor earnuch	st all secured claims. If a creditor has ach claim. If more than one creditor has a se possible, list the claims in alphabe Tidewater Credit Services	as a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditor's name.  Describe the property that secures the claim:  2015 Chrysler 200S  As of the date you file, the claim is: Check all that	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. Listor earnuch	st all secured claims. If a creditor has ach claim. If more than one creditor has a possible, list the claims in alphabe  Tidewater Credit  Services  Creditor's Name	as a particular claim, list the other creditors in Part 2. As stical order according to the creditor's name.  Describe the property that secures the claim:  2015 Chrysler 200S	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. Li: for ea much	st all secured claims. If a creditor has ach claim. If more than one creditor has a possible, list the claims in alphabe  Tidewater Credit Services Creditor's Name  P.O. Box 791137	as a particular claim, list the other creditors in Part 2. As etical order according to the creditor's name.  Describe the property that secures the claim:  2015 Chrysler 200S  As of the date you file, the claim is: Check all that apply.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. Listor each much	tall secured claims. If a creditor has ach claim. If more than one creditor has as possible, list the claims in alphabet as possible. It is the claims in alphabet as possible	as a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditor's name.  Describe the property that secures the claim:  2015 Chrysler 200S  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. Li: for ea much	tall secured claims. If a creditor has ach claim. If more than one creditor has as possible, list the claims in alphabet as possible. It is the claims in alphabet as possible	as a particular claim, list the other creditors in Part 2. As a particular claim, list the other creditor's name.  Describe the property that secures the claim:  2015 Chrysler 200S  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. Li: for earnuch	petior 2 pouse if, filing)   First Name   Middle Name   Last Name				
2. Li: for each of the control of th	st all secured claims. If a creditor has ach claim. If more than one creditor has possible, list the claims in alphabet ach claims. If more than one creditor has possible, list the claims in alphabet ach claims. If more than one creditor has possible, list the claims in alphabet ach claims. If more than one creditor's Name  P.O. Box 791137  Baltimore, MD 21279  Number, Street, City, State & Zip Code  owes the debt? Check one.  ebtor 1 only ebtor 2 only	Describe the property that secures the claim:  2015 Chrysler 200S  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sec	Amount of claim Do not deduct the value of collateral. \$18,307.00	Value of collateral that supports this claim	Unsecured portion If any
2. Li: for each of the control of th	st all secured claims. If a creditor has ach claim. If more than one creditor has possible, list the claims in alphabet ach claims. If more than one creditor has possible, list the claims in alphabet ach claims. If more than one creditor has possible, list the claims in alphabet ach claims. If more than one creditor's Name  P.O. Box 791137  Baltimore, MD 21279  Number, Street, City, State & Zip Code  owes the debt? Check one.  ebtor 1 only ebtor 2 only	Describe the property that secures the claim:  2015 Chrysler 200S  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sec car loan)	Amount of claim Do not deduct the value of collateral. \$18,307.00	Value of collateral that supports this claim	Unsecured portion If any
Who  □ □ □ □ □ □ □ □ □	tall secured claims. If a creditor has ach claim. If more than one creditor has ach claim. If more than one creditor has as possible, list the claims in alphabet as possible, list the claims in alphabe	as a particular claim, list the other creditors in Part 2. As effical order according to the creditor's name.  Describe the property that secures the claim:  2015 Chrysler 200S  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sec car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	Amount of claim Do not deduct the value of collateral. \$18,307.00	Value of collateral that supports this claim	Unsecured portion If any
Who D D D A C	tall secured claims. If a creditor has ach claim. If more than one creditor has ach claim. If more than one creditor has as possible, list the claims in alphabet as possible, list the claims in alphabe	as a particular claim, list the other creditors in Part 2. As effical order according to the creditor's name.  Describe the property that secures the claim:  2015 Chrysler 200S  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or sec car loan)  Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	Amount of claim Do not deduct the value of collateral. \$18,307.00	Value of collateral that supports this claim	Unsecured portion If any

Part 2: List Others to Be Notified for a Debt That You Already Listed

If this is the last page of your form, add the dollar value totals from all pages.

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$18,307.00

Write that number here:

				Document	Page	18 of 5	57		
Fil	I in this informa	ation to identify your o	case:						
De	ebtor 1	Nicole Nyree Burd	len						
		First Name	Middle N	ame	Last Nam	е			
De	ebtor 2								
(Sp	ouse if, filing)	First Name	Middle N	ame	Last Nam	е			
Un	nited States Banl	kruptcy Court for the:	NORTHERI	N DISTRICT OF ILL	LINOIS				
							•		
	ase number			_				□ Chook	r if this is on
(11 14	(ilowii)							_	t if this is an ded filing
								amon	aca ming
Of	ficial Form	106E/F							
Sc	chedule E/	F: Creditors W	ho Have	Unsecured	Claim	S			12/15
Ве	as complete and	accurate as possible. Us	e Part 1 for cre	ditors with PRIORIT	Y claims a	nd Part 2 fo	r creditors with NON	PRIORITY claims. L	ist the other party to
Sch Sch left. nan	nedule G: Executor nedule D: Creditor . Attach the Conti ne and case numl	acts or unexpired leases bry Contracts and Unexpires Who Have Claims Secunation Page to this page ber (if known).	red Leases (O ured by Proper e. If you have	fficial Form 106G). D ty. If more space is r no information to rep	o not incl needed, co	ude any cre opy the Part	ditors with partially s you need, fill it out, i	ecured claims that a number the entries it	are listed in in the boxes on the
Га 1.		s have priority unsecured							
١.	No. Go to Par	• •	a Ciaiiiis agaiii	st your					
		11 2.							
^	Yes.		. If		-14		4 46	h.f	and alaim linkad
۷.	identify what type possible, list the	priority unsecured claims e of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	s both priority a r according to t	nd nonpriority amount he creditor's name. If	ts, list that you have n	claim here a	nd show both priority a	nd nonpriority amour	nts. As much as
	(For an explanati	ion of each type of claim, s	ee the instruction	ons for this form in the	instruction	booklet.)	Total claim	Priority	Nonpriority
	_						Total Claim	amount	amount
2.1	Departm	ent of the Treasury	L	ast 4 digits of accour	nt number	5572	\$7,000.00	\$7,000.00	\$0.00
	Priority Cred					NA14!1			
	P.O. Box	Revenue Service	V	hen was the debt inc	currear	Multiple	erears	-	
		ohia, PA 19101-7346	6						
	Number Stre	eet City State Zlp Code	Α	s of the date you file	, the claim	is: Check a	II that apply		
	Who incurred	the debt? Check one.		Contingent 1					
	Debtor 1 on	ly		<b>]</b> Unliquidated					
	Debtor 2 on	ly		Disputed					
	Debtor 1 an	d Debtor 2 only	T	pe of PRIORITY uns	secured cl	aim:			
	☐ At least one	of the debtors and anothe	r 🗆	Domestic support of	oligations				
	☐ Check if thi	is claim is for a commun	ity debt	Taxes and certain of	ther debts	vou owe the	aovernment		
		bject to offset?	_	Claims for death or p		•	•		
	■ No			Other. Specify		, , ,			
	☐ Yes		_	Inc	come Ta	ı <b>X</b>			-
	10 11 ( 11	// NONDO	V 11						
		of Your NONPRIORIT							
3.	Do any creditors	s have nonpriority unsec	ured claims a	gainst you?					
	☐ No. You have	nothing to report in this pa	art. Submit this	form to the court with	your other	schedules.			
	Yes.								
1		connicrity uncoured al	nime in the cla	habatical arder of th	o orodito-	who holds	and claim If a are dif	or had more than	nonnriority.
4.	unsecured claim,	nonpriority unsecured cla , list the creditor separately holds a particular claim, li	for each claim	For each claim listed	, identify w	hat type of c	laim it is. Do not list cla	ims already included	I in Part 1. If more

Total claim

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Nicole Nyree Burden	Case number (if know)	
Aarons Sale & Lease	Last 4 digits of account number C113	\$1,128.00
Nonpriority Creditor's Name 1015 Cobb Place Blvd.	When was the debt incurred?	
Kennesaw, GA 30144  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the damins. Oneck an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Debt Owed	
Aarons Sale & Lease	Last 4 digits of account number XXXX	\$224.00
Nonpriority Creditor's Name 1015 Cobb Place Blvd.	When was the debt incurred?	
Kennesaw, GA 30144 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no or and date you me, and oranni to onlook all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Debt Owed	
ACL Laboratories	Last 4 digits of account number	\$100.00
Nonpriority Creditor's Name		\$100.00
8901 W. Lincoln Avenue Milwaukee, WI 53227	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Bills	

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Nicole Nyree Burden	Case number (if know)	
Advocate Medical Group	Last 4 digits of account number	\$600.00
Nonpriority Creditor's Name 3075 Highland Parkway Downers Grove, IL 60515	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Bills	
Advocate South Suburban Hospital	Last 4 digits of account number	\$1,500.00
Nonpriority Creditor's Name 17800 Kedzie Avenue	When was the debt incurred?	
Hazel Crest, IL 60429	When was the destiniculted:	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Bills	
America's Financial Choice	Last 4 digits of account number	\$1,200.00
Nonpriority Creditor's Name	When was the debt incurred?	
664 River Oaks Drive Calumet City, IL 60409	Wileli was tile debt iliculted?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Pay Day Loan	
	— Guior, Specify and and	

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Debte	or 1 Nicole Nyree Burden	Case number (if know)	
4.7	Atlas Acquisitions	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name 294 Union Street	When was the debt incurred?	
	Hackensack, NJ 07601	Then was the dest incurred.	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Debt Owed	
4.8	Bank of America	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name P.O. Box 30137 Tampa, FL 33630	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Debt Owed	
4.9	Calvary Portfolio Services	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name		
	500 Summit Lake Drive Valhalla, NY 10595	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	•	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	□ Student loans	
	debt	Dobligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Debt Owed	

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Case number (if know)

Debto	Nicole Nyree Burden	Case number (if know)	
4.1	Chase	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name 1111 Polaris Parkway Columbus OH 43340	When was the debt incurred?	
	Columbus, OH 43240  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Overdraft Account	
4.1	City of Chicago Dept. of Revenue	Last 4 digits of account number	\$300.00
1	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ300.00
	Bureau of Parking - Bankruptcy 121 N. LaSalle Street, Room 107A	When was the debt incurred?	
	Chicago, IL 60602	_	
	Number Street City State ZIp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	_ *****	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Fines/Parking Tickets	
4.1	City of Harvey		\$200.00
2	Nonpriority Creditor's Name	Last 4 digits of account number	φ200.00
	15320 Broadway Ave. Harvey, IL 60426	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Fines/Parking Tickets	

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Case number (if know)

Nicole Nyree Burden	Case number (if know)	
Comcast	Last 4 digits of account number	\$500
Nonpriority Creditor's Name 41112 Concept Drive	When was the debt incurred?	<u>-</u>
Plymouth, MI 48170-4253  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	7.6 of the date year me, the stain is. One of an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify Cable Bill	
Commonwealth Edison Co.	Last 4 digits of account number	\$1,100
Nonpriority Creditor's Name		* , -
3 Lincoln Center	When was the debt incurred?	
Attn: Bankruptcy Section Oak Brook Terrace, IL 60181		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Electric Bill	
Credit One Bank	Last 4 digits of account number	\$40
Nonpriority Creditor's Name P.O. Box 60500	When was the debt incurred?	
City Of Industry, CA 91716  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card Debt	

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Case number (if know)

Debto	Nicole Nyree Burden	Case number (if know)	
4.1	First Premier Bank	Last 4 digits of account number XXXX	\$500.00
<u> </u>	Nonpriority Creditor's Name 601 S. Minnesota Ave. Sioux Falls, SD 57104	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?  ■ No	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Debt	
4.1	Gateway Financial Services	Last 4 digits of account number XXXX	\$11,406.00
	Nonpriority Creditor's Name P.O. Box 6919 Saginaw, MI 48608	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Automobile Deficiency	
4.1	IIL Dept. of Employment Security  Nonpriority Creditor's Name	Last 4 digits of account number	\$2,000.00
	16845 S. Halsted Harvey, IL 60426	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a separation agreement or divorce that you did not</li></ul>	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	■ Other. Specify Benefits Overpayment	
	_ 100	- Other, Specify	

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Debtor 1 Nicole Nyree Burden Case number (if know) 4.1 \$10,000.00 Illinois Tollway Last 4 digits of account number 9 Nonpriority Creditor's Name P.O. Box 5201 When was the debt incurred? Lisle, IL 60532 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Tolls 4.2 **Ingalls Hospital** \$500.00 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? 2250 E. Devon Avenue Des Plaines, IL 60018 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.2 **ISAC** \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name 1755 Lake Cook Road When was the debt incurred? Deerfield, IL 60015 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify

Student Loan

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Debtor 1 Nicole Nyree Burden Case number (if know) 4.2 \$500.00 LVNV Funding Last 4 digits of account number 2 Nonpriority Creditor's Name 625 Pilot Rd When was the debt incurred? Suite2/3 Las Vegas, NV 89119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Debt Owed ☐ Yes 4.2 Medical Business Bureau \$269.00 **XXXX** Last 4 digits of account number 3 Nonpriority Creditor's Name P.O. Box 1219 When was the debt incurred? Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.2 Midland Funding Unknown Last 4 digits of account number Nonpriority Creditor's Name 8875 Aero Drive When was the debt incurred? Ste. 200 San Diego, CA 92123 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Debt Owed ☐ Yes

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Debte	or 1 Nicole Nyree Burden	Case number (if know)	
4.2 5	Nicor Nonpriority Creditor's Name P.O. Box 5407 Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply	\$800.00
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Gas Bill	
4.2	Opportunity Financial Nonpriority Creditor's Name	Last 4 digits of account number	\$1,200.00
	One Prudential Plaza Chicago, IL 60601	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	_		
	Yes	Other. Specify Pay Day Loan	
4.2	Pathology Consultants	Last 4 digits of account number	\$200.00
	Nonpriority Creditor's Name  P.O. Box 583`	When was the debt incurred?	
	Michigan City, IN 46361		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Medical Bills	

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Nicole Nyree Burden	Case number (if know)	
Pinski Dermatology	Last 4 digits of account number	\$215.00
Nonpriority Creditor's Name	<del></del>	<u> </u>
150 N. Michigan	When was the debt incurred?	
Chicago, IL 60601  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	ne or and alle year me, and or announced an area appropriately	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes		
□ Yes	Other. Specify Medical Bills	
Prestige Financial	Last 4 digits of account number XXXX	\$14,068.00
Nonpriority Creditor's Name		
P.O. Box 26707	When was the debt incurred?	
Salt Lake City, UT 84115  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Automobile Deficiency	
State Collection Service	Last 4 digits of account number XXXX	\$57.00
Nonpriority Creditor's Name P.O. Box 6250	When was the debt incurred?	
Madison, WI 53701		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Bills	

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Case number (if know)

Debtor	1 Nicole Nyree Burden	Case number (if know)	
4.3	Outliness Haven't Aid Control		<b>*</b> 200 00
1	Sullivan Urgent Aid Centers  Nonpriority Creditor's Name	Last 4 digits of account number	\$300.00
	Dept. 20-6001	When was the debt incurred?	
	P.O. Box 5990		
	Carol Stream, IL 60197		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.3	T-Mobile USA		\$500.00
2	Nonpriority Creditor's Name	Last 4 digits of account number	\$500.00
	P.O. Box 53410 Bellevue, WA 98015-3410	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Cellular Phone Bill	
4.3	Trustmark Recovery Services	Last 4 digits of account number XXXX	\$95.00
3	Nonpriority Creditor's Name	Last 4 digits of account number XXXX	Ψ33.00
	for Dr. Terry Ebert	When was the debt incurred?	
	541 Otis Bowen Drive		
	Munster, IN 46321  Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is. Offect all that apply	
	■ Debtor 1 only	□ Continued	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	_ *****	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other Specific Medical Bills	

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Case number (if know)

DCDIO	NICOLE IN	ree burden		Od3C II		
4.3	USA Funds		Last 4 digits of account number	er		\$3,000.00
	Nonpriority Cred	80	When was the debt incurred?			
-		DIS, IN City State Zlp Code the debt? Check one.	As of the date you file, the clai	m is: Check	all that apply	
	■ Debtor 1 onl		Continuent			
	Debtor 2 onl		☐ Contingent ☐ Unliquidated			
	Debtor 1 and	•	☐ Disputed			
	_	of the debtors and another	Type of NONPRIORITY unsecu	red claim:		
		s claim is for a community	☐ Student loans			
	debt	bject to offset?		eparation ag	reement or divorce that you did not	
	■ No	2,001.000	Debts to pension or profit-sha	aring plans, a	and other similar debts	
	☐ Yes		■ Other. Specify Debt Owe			
4.3	Verizon Wir	reless	Last 4 digits of account number	er XXXX		\$1,573.00
0	Nonpriority Cred		Last 4 digits of account number			Ψ1,010.00
	P.O. Box 26 Minneapolis	s, MN 55426	When was the debt incurred?			
		City State ZIp Code the debt? Check one.	As of the date you file, the clai	m is: Check	all that apply	
	Debtor 1 onl	y	☐ Contingent			
	Debtor 2 onl	у	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecu	red claim:		
	☐ Check if thi	s claim is for a community	☐ Student loans			
	debt	bject to offset?	Obligations arising out of a sereport as priority claims	eparation ag	reement or divorce that you did not	
	No No	bject to onset:	Debts to pension or profit-sha	aring plans a	and other similar debts	
	☐ Yes		■ Other. Specify Cellular F			
			— Other: Specify			
Part 3:	List Others	s to Be Notified About a Debt	That You Already Listed			
is tryin have m	g to collect fro nore than one c	m you for a debt you owe to som	eone else, list the original creditor you listed in Parts 1 or 2, list the ac	r in Parts 1	dy listed in Parts 1 or 2. For examp or 2, then list the collection agency editors here. If you do not have add	here. Similarly, if you
	d Address aboratories		n which entry in Part 1 or Part 2 did y ne <b>4.30</b> of ( <i>Check one</i> ):		riginal creditor? Creditors with Priority Unsecured Clai	me
	I. Lincoln A		inc <u>inee</u> of (official offic).		Creditors with Nonpriority Unsecured	
Milwau	ıkee, WI 532		ast 4 digits of account number	— Turt 2. V	orealions with Nonpholicy Oriscoured	Olaimo
Part 4:	Add the Ar	mounts for Each Type of Uns	ecured Claim			
		certain types of unsecured claim		al reporting	purposes only. 28 U.S.C. §159. Add	d the amounts for each
					Total Claim	
	6a. <b>otal</b>	Domestic support obligations		6a.	\$	-
from Pa	ims irt 1 6b.	Taxes and certain other debts	ou owe the government	6b.	\$ 7,000.00	
	6c.		jury while you were intoxicated	6c.	\$ 0.00	-
	6d.	Other. Add all other priority unser	cured claims. Write that amount here	. 6d.	\$ 0.00	-
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	-

Total Claim

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Debtor 1 N	icole Ny	rree Burden 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Case	number (if kno	w)
Total	6f.	Student loans	6f.	\$	3,000.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	56,435.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	59,435.00

		12101111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Nicole Nyree Bur	den		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				<del>_</del>
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>

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		1,707,11111	III Paue 33 t	11 37	
Fill in this	information to identify your	case:			
Debtor 1	Nicole Nyree Bur	den			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
oou o.u.	oo zamaapto, oodat ter ano.				
Case numb	per				☐ Check if this is an
·					amended filing
∩fficial	Form 10011				
	Form 106H	-64			
Schea	ule H: Your Cod	eptors			12/15
Arizona  No.		, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		ty states and territories include
in line Form 1	2 again as a codebtor only i	if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt
					,
3.1	Name			Schedule D, lin	
				☐ Schedule E/F, I☐ Schedule G, Iin	
_	Number Street				
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, lin	e
	Name			☐ Schedule E/F, I	line
				☐ Schedule G, lin	ne
	Number Street			_	
(	City	State	ZIP Code		

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	in this information to into the interior of th	, ,										
	_	Nicole Nyree	Burden				-					
	otor 2 use, if filing)						-					
Unit	ted States Bankrupto	y Court for the:	NORTHERN DISTRIC	T OF ILLIN	OIS		_					
Cas (If kn	se number							□ A		ed filing ent showin	g postpetition	
Of	fficial Form 1	<u> 1061</u>						M	IM / DD/ Y	/YYY		
Sc	chedule I: Y	our Inco	ome									12/15
supp spot	olying correct infornuse. If you are separ the a separate sheet	nation. If you rated and you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, a th you, do	nd your spo not include	use i inforr	s livi natic	ng with on about	you, incl your spo	ude inforn ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employ information.	ment		Debtor 1					Debtor 2	2 or non-fi	iling spouse	
	If you have more the		Employment status	■ Emplo	■ Employed				☐ Empl	oyed		
	attach a separate painformation about a		Employment status	☐ Not en	nployed				☐ Not e	mployed		
	employers.		Occupation	Health C	Coordinato	r						
	Include part-time, so self-employed work		Employer's name	Blue Cro	oss Blue S	hield	s of					
	Occupation may incor homemaker, if it		Employer's address		andolph o, IL 60601							
			How long employed th	here?	5 years				_			
Par	t 2: Give Deta	ils About Mon	thly Income									
	mate monthly incomuse unless you are se		ate you file this form. If y	you have no	thing to repo	rt for	any li	ine, write	\$0 in the	space. Inc	clude your noi	n-filing
	u or your non-filing sp e space, attach a sep		re than one employer, co	mbine the in	nformation fo	r all e	mplo	yers for	that perso	on on the li	nes below. If	you need
								For Deb	otor 1		btor 2 or ing spouse	
2.	List monthly gross deductions). If not p	s wages, salar paid monthly, o	ry, and commissions (becalculate what the monthly	efore all pay y wage wou	roll ld be.	2.	\$	4,	637.45	\$	N/A	
3.	Estimate and list n	nonthly overti	me pay.			3.	+\$		0.00	+\$	N/A	
4.	Calculate gross In	come. Add lin	e 2 + line 3.			4.	\$ .	4,63	37.45	\$	N/A	

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Debto	r 1	Nicole Nyree Burden	-	Ca	ise number (if k	nown)				
				F	For Debtor 1			Debtor :		
	Cop	y line 4 here	4.	\$	4,63	7.45	\$		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	. 48	4.72	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$		N/A	-
	5c.	Voluntary contributions for retirement plans	5c.			5.45	\$		N/A	-
	5d.	Required repayments of retirement fund loans	5d.	. \$		2.00	\$		N/A	
	5e.	Insurance	5e.	. \$		0.36	\$		N/A	-
	5f.	Domestic support obligations	5f.	\$		0.00	\$		N/A	-
	5g.	Union dues	5g.			7.45	\$		N/A	-
	5h.	Other deductions. Specify: Fitness Membership	5h.	.+ \$	2	5.45	+ \$		N/A	=
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,28	5.43	\$		N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,35	2.02	\$		N/A	
	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.			0.00	\$		N/A	
	8b.	Interest and dividends	8b.	. \$		0.00	\$		N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.			0.00	\$		N/A	
	8d.	Unemployment compensation	8d.			0.00	\$		N/A	_
	8e.	Social Security	8e.	. \$		0.00	\$		N/A	5
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.			0.00	\$		N/A	_
	8g.	Pension or retirement income	8g.			0.00	\$		N/A	
	8h.	Other monthly income. Specify:	_ 8h.	.+ \$		0.00	+ \$		N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	ı	0.00	\$		N/A	
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	3,352.02	+ \$		N/A	= \$	3,352.02
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ—	3,332.02			17/		3,332.02
	Incluothe Othe Dou	e all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe					chedule 11.		0.00
		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	3,352.02
13.	Do <u>y</u>	you expect an increase or decrease within the year after you file this form'	?							y income

Official Form 106I Schedule I: Your Income page 2

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Fill	in this information to identify	your case:					
Deb	otor 1 Nicole Nyr	ee Burden			Chec	ck if this is:	
	otor 2 ouse, if filing)					An amended filing A supplement show 13 expenses as of	wing postpetition chapter the following date:
``	ted States Bankruptcy Court for	he NORTI	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
		ne. North	ILKIN DIGTICIO TOT ILLIN	010		WIWI7 DD 7 TTTT	
	se number nown)						
	fficial Form 106						
	chedule J: You						12/15
info	as complete and accurate ormation. If more space is mber (if known). Answer e	needed, atta	ach another sheet to this	e filing together, b form. On the top of	oth are equ f any addition	ally responsible to onal pages, write y	or supplying correct your name and case
	Describe Your Hou	sehold					
1.	Is this a joint case?						
	■ No. Go to line 2.  ☐ Yes. <b>Does Debtor 2 liv</b>	o in a sonar	ate household?				
	□ No	e iii a sepai	ate nousenoiu:				
		nust file Offic	ial Form 106J-2, Expenses	for Separate House	ehold of Deb	tor 2.	
2.	Do you have dependents		. ,	•			
۷.		i? □ No	En	B I		B I	Barrier Investor
	Do not list Debtor 1 and Debtor 2.	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.			Son		7 years	■ Yes
							□ No
							☐ Yes
							□ No
							☐ Yes
							□ No
_	Da						☐ Yes
3.	Do your expenses include expenses of people other	r than	No				
	yourself and your depen		Yes				
Par	rt 2: Estimate Your Ong	oina Month	ly Evnoncos				
Est	timate your expenses as of penses as of a date after the plicable date.	your bankr	uptcy filing date unless y				
Inc	lude expenses paid for wit	h non-cash	government assistance in	f vou know			
the	value of such assistance ficial Form 106l.)					Your exp	enses
4.	The rental or home owner payments and any rent for		nses for your residence. In or lot.	nclude first mortgag	e 4. \$	S	600.00
	If not included in line 4:						
	4a. Real estate taxes				4a. \$	3	0.00
	4b. Property, homeown	er's, or rente	r's insurance		4b. \$		0.00
	4c. Home maintenance	repair, and	upkeep expenses		4c. \$	S	0.00
_	4d. Homeowner's associ				4d. \$		0.00
5.	Additional mortgage pay	ments for v	<b>dur residence</b> , such as ho	me equity loans	5. \$	`	0.00

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6a. 6b. 6c. 6d. 7.	\$	0.00 40.00
6b. 6c. 6d.	\$	40.00
6b. 6c. 6d.	\$	40.00
6c. 6d.		
6d.		150.00
	\$	0.00
	\$	500.00
8.	\$	650.00
9.	·	200.00
10.	· -	
		200.00
11.	Φ	100.00
12.	\$	600.00
		200.00
	· ·	200.00
14.	Ψ	200.00
15a	\$	0.00
		0.00
	· -	160.00
	·	0.00
	Ψ	0.00
16	\$	200.00
	Ť	200.00
17a	\$	436.04
	· -	0.00
	·	0.00
		0.00
1/u.	Φ	0.00
18.	\$	0.00
	·	0.00
19		0.00
	ur Income.	
		0.00
		0.00
	·	0.00
		0.00
	·	0.00
_ 21.	+\$	0.00
	1	
	\$	4,236.04
	\$	
	\$	4,236.04
		<b></b>
•		
23a.	\$	3,352.02
23b.	-\$	4,236.04
1		
	ı e	004.00
23c.	<b>\$</b>	-884.02
file this		e or decrease because
		or decrease decause of
ποπgage μ	Jayment to increase	
ποπgage μ	Jayment to increase	
	13. 14.  15a. 15b. 15c. 15d.  16.  17a. 17b. 17d. 18.  20a. 20b. 20c. 20d. 20e. 21.  23a. 23b.	14. \$  15a. \$  15b. \$  15c. \$  15d. \$  16. \$  17a. \$  17b. \$  17c. \$  17d. \$  18. \$  20a. \$  20b. \$  20c. \$  20d. \$  20e. \$  21. +\$   \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$

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Fill in this info	ormation to identify your	case:			
Debtor 1	Nicole Nyree Bur	den			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Norse	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Casa numbar					
Case number (if known)					☐ Check if this is an
					amended filing
You must file the obtaining money	his form whenever you f	ile bankruptcy schedules n connection with a banl		Making a false state	ement, concealing property, or 0, or imprisonment for up to 20
Si	gn Below				
Did you p	oay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				cruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed	with this declaratio	on and
Y /c/ Ni	cole Nyree Burden		Y		

Signature of Debtor 2

Date

Nicole Nyree Burden Signature of Debtor 1

Date April 4, 2018

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Fill in	this informat	ion to identify you	r case:			
Debto	_	Nicole Nyree Bu				
Debto		First Name	Middle Name	Last Name		
		First Name	Middle Name	Last Name		
Unite	d States Bankr	uptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
Cooo	numbor					
(if know	number <sub>vn)</sub>					Check if this is an mended filing
	cial Form		Affairs for Individ	duals Filing for B	ankruptcy	4/10
inforn	nation. If more er (if known).	e space is needed, Answer every que	attach a separate sheet to	this form. On the top of an	equally responsible for sup y additional pages, write you	
1. V	Vhat is your cu	ırrent marital statı	ıs?			
Г	☐ Married					
Ī	Not married	d				
2. D	Ouring the last	3 years, have you	lived anywhere other than	where you live now?		
-	- -		•	•		
		I of the places you I	ived in the last 3 years. Do no	ot include where you live nov	I.	
1	Debtor 1 Prior	Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
	3151 Bernice Lansing, IL 6		From-To: <b>2014 - 2015</b>	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	and territories  No Yes. Make	include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
F	ill in the total a	mount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fill in	the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		current year until or bankruptcy:	■ Wages, commissions, bonuses, tips	\$12,753.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Document Debtor 1 Nicole Nyree Burden

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
5.	Include in and other winnings.	come regard public bene If you are fi	dless of wheth fit payments; ling a joint cas	er that income is taxable. E pensions; rental income; int e and you have income tha	vo previous calendar years? xamples of other income are a erest; dividends; money collect you received together, list it orately. Do not include income the	ted from lawsuits; royalties; ar only once under Debtor 1.		
	<b>-</b>							
	■ No □ Yes	Fill in the d	etails.					
				D-144		Dalitan O		
				Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	Gross income	
				Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)	
Pa	rt 3: Lis	t Certain Pa	ayments You	Made Before You Filed fo	r Bankruptcy			
6.		r Debtor 1's Neither D	s or Debtor 2 ebtor 1 nor D	s debts primarily consum	er debts? sumer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an	
		During the	90 davs befo	re vou filed for bankruptcy.	did you pay any creditor a total	I of \$6.425* or more?		
		□ No.	Go to line 7		, , , ,	• •		
		☐ Yes	paid that cre		aid a total of \$6,425* or more in ents for domestic support obligenthis bankruptcy case.			
		* Subject			ars after that for cases filed on	or after the date of adjustmen	t.	
	■ Yes.			r both have primarily cone re you filed for bankruptcy,	sumer debts. did you pay any creditor a tota	l of \$600 or more?		
		■ No.	Go to line 7					
		☐ Yes	include pay		aid a total of \$600 or more and obligations, such as child supp			

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Dates of payment

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

**Total amount** 

paid

Amount you

still owe

Was this payment for ...

No

Yes. List all payments to an insider.

**Creditor's Name and Address** 

**Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe paid

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Case number (if known) Document Nicole Nyree Burden Debtor 1 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address Total amount** Amount you Reason for this payment Dates of payment Include creditor's name still owe paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ■ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened American Financial Choice** Cash 2017 - 2018 \$250.00 669 River Oaks Drive Calumet City, IL 60409 ☐ Property was repossessed. ☐ Property was foreclosed. Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your

**Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No П Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address:

Yes. Fill in the details.

8.

accounts or refuse to make a payment because you owed a debt?

Case 18-09930 Doc 1 Filed 04/04/18 Entered 04/04/18 21:47:11 Page 42 of 57 Case number (if known) Document Debtor 1 Nicole Nyree Burden 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No П Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was property transferred payments received or debts Address made

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

☐ Yes. Fill in the details.

Person's relationship to you

Name of trust Description and value of the property transferred Date Transfer was made

paid in exchange

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Case number (if known) Document

Nicole Nyree Burden Debtor 1

Pai	t 8: List of Certain Financial Accounts, Instr	ruments Safe Denocit I	Boyes and St	orage Unit	•	
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	were any financial acc	ounts or instr	uments he	ld in your name, or for yo	
	☐ Yes. Fill in the details.					
		ast 4 digits of account number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for b	oankruptcy, ar	ny safe dep	posit box or other deposit	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Control fo	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Includ	de any proper	ty you bor	rowed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, Sta Code)		Describe	the property	Value
Pai	t 10: Give Details About Environmental Inform	mation				
For	the purpose of Part 10, the following definition	s apply:				
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.					
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	•	nvironmental I	aw, wheth	er you now own, operate	, or utilize it or used
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		s a hazardous	waste, ha	zardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that	you know about, regar	dless of when	they occu	ırred.	
24.	Has any governmental unit notified you that yo	ou may be liable or pot	entially liable	under or i	n violation of an environn	nental law?
	■ No □ Yes. Fill in the details.					
	Name of site	Governmental unit		Enviro	onmental law, if you	Date of notice

Address (Number, Street, City, State and

ZIP Code)

know it

Address (Number, Street, City, State and ZIP Code)

Case 18-09930 Doc 1 Filed 04/04/18 Entered 04/04/18 21:47:11 Page 44 of 57 Document se number (if known) Debtor 1 Nicole Nyree Burden 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Nicole Nyree Burden Signature of Debtor 2 Nicole Nyree Burden Signature of Debtor 1 Date April 4, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

■ No

Official Form 107

page 6

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Case number (if known) Document

Debtor 1 Nicole Nyree Burden

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Fill in this infor	mation to identify your	case:				
Debtor 1	Nicole Nyree Bur	den				
5.1.	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILL	INOIS		
	,					
Case number (if known)						☐ Check if this is an amended filing
Official Fo		n for Indiv	/iduals	Filing Under Ch	napter 7	, 12/15
	ividual filing under cha	. ,,	ll out this for	n if:		
you have least	ever is earlier, unless th	and the lease has n vithin 30 days after	you file your	bankruptcy petition or by the use. You must also send copi		
	eople are filing togethe	r in a joint case, bo	oth are equall	y responsible for supplying c	orrect inform	ation. Both debtors must
	and accurate as possit our name and case nu		s needed, atta	ach a separate sheet to this fo	orm. On the to	p of any additional pages,
Part 1: List Y	our Creditors Who Hav	e Secured Claims				
1. For any credit	ors that you listed in P	art 1 of Schedule D	: Creditors V	/ho Have Claims Secured by I	Property (Offi	cial Form 106D), fill in the
information be Identify the cr	elow. editor and the property t	hat is collateral	What do y	ou intend to do with the propedebt?	erty that	Did you claim the property as exempt on Schedule C?
Creditor's <b>T</b> name:	idewater Credit Serv	rices		er the property. the property and redeem it.		□ No
Description of	2015 Chrysler 200	s		he property and enter into a		Yes
property securing debt	-			mation Agreement. he property and [explain]:		
Part 2: List Y	our Unexpired Persona	I Proporty Lossos				
For any unexpire in the information	ed personal property le on below. Do not list rea	ase that you listed al estate leases. Un	expired lease	G: Executory Contracts and Les are leases that are still in e oes not assume it. 11 U.S.C. §	ffect; the leas	ases (Official Form 106G), fill se period has not yet ended.
Describe your u	inexpired personal pro	perty leases			Will	the lease be assumed?
Lessor's name:					<b>-</b>	Nο
Description of lea	ased					
Property:						l'es
Lessor's name:					<b>□</b> 1	No
Description of lea Property:	ased					⁄es
Lessor's name:					<b>–</b>	No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debt	tor 1	Nicole Nyree Burden	Case number (if known)	
Desc Prop	•	n of leased		☐ Yes
		ame: n of leased		□ No □ Yes
	•	ame: n of leased		□ No □ Yes
	•	ame: n of leased		□ No □ Yes
		ame: n of leased		□ No □ Yes
	r pen	Sign Below alty of perjury, I declare that I have ind at is subject to an unexpired lease.	icated my intention about any property of my estate that se	cures a debt and any personal
X	Nico	icole Nyree Burden le Nyree Burden ture of Debtor 1	Signature of Debtor 2	
	Date	April 4, 2018	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-09930 Doc 1 Filed 04/04/18 Entered 04/04/18 21:47:11 Desc Main Document Page 52 of 57

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court**Northern District of Illinois

In re	Nicole Nyree Burden		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	y, or agreed to be pa	id to me, for services i	
	For legal services, I have agreed to accept		\$	500.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	500.00	
2. \$	<b>0.00</b> of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. <b>I</b>	I have not agreed to share the above-disclosed compe	ensation with any other person	n unless they are me	mbers and associates	of my law firm.
[	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				law firm. A
6. I	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspec	ets of the bankrupte	case, including:	
b c	Analysis of the debtor's financial situation, and rende. Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of credito. [Other provisions as needed]  Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ement of affairs and plan which its and confirmation hearing, a educe to market value; ex ins as needed; preparatio	th may be required; and any adjourned be cemption planning	earings thereof; g; preparation and	filing of
7. B	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			ices, relief from sta	y actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	or payment to me fo	representation of the	debtor(s) in
Δr	pril 4, 2018	/s/ Jeffrey L. Bei	nson		
Da	•	Jeffrey L. Benso	n 6203738		
		Signature of Attorn Law Offices of J			
		3337 W. 95th Str			
		Ste. # 2 Evergreen Park,	IL 60805		
		Name of law firm			

#### United States Bankruptcy Court Northern District of Illinois

In re	Nicole Nyree Burden	Debtor(s)	Case No. Chapter 7	
	VE	RIFICATION OF CREDITOR MA	- <u> </u>	
		Number of C		38
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and correct to t	he best of my
Date:	April 4, 2018	/s/ Nicole Nyree Burden Nicole Nyree Burden Signature of Debtor		

Aarons Sale & Lease 1015 Cobb Place Blvd. Kennesaw, GA 30144

Aarons Sale & Lease 1015 Cobb Place Blvd. Kennesaw, GA 30144

ACL Laboratories 8901 W. Lincoln Avenue Milwaukee, WI 53227

ACL Laboratories 8901 W. Lincoln Avenue Milwaukee, WI 53227

Advocate Medical Group 3075 Highland Parkway Downers Grove, IL 60515

Advocate South Suburban Hospital 17800 Kedzie Avenue Hazel Crest, IL 60429

America's Financial Choice 664 River Oaks Drive Calumet City, IL 60409

Atlas Acquisitions 294 Union Street Hackensack, NJ 07601

Bank of America P.O. Box 30137 Tampa, FL 33630

Calvary Portfolio Services 500 Summit Lake Drive Valhalla, NY 10595

Chase 1111 Polaris Parkway Columbus, OH 43240 City of Chicago Dept. of Revenue Bureau of Parking - Bankruptcy 121 N. LaSalle Street, Room 107A Chicago, IL 60602

City of Harvey 15320 Broadway Ave. Harvey, IL 60426

Comcast 41112 Concept Drive Plymouth, MI 48170-4253

Commonwealth Edison Co. 3 Lincoln Center Attn: Bankruptcy Section Oak Brook Terrace, IL 60181

Credit One Bank
P.O. Box 60500
City Of Industry, CA 91716

Department of the Treasury Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

First Premier Bank 601 S. Minnesota Ave. Sioux Falls, SD 57104

Gateway Financial Services P.O. Box 6919 Saginaw, MI 48608

IIL Dept. of Employment Security 16845 S. Halsted Harvey, IL 60426

Illinois Tollway P.O. Box 5201 Lisle, IL 60532

Ingalls Hospital 2250 E. Devon Avenue Des Plaines, IL 60018

ISAC 1755 Lake Cook Road Deerfield, IL 60015

LVNV Funding 625 Pilot Rd Suite2/3 Las Vegas, NV 89119

Medical Business Bureau P.O. Box 1219 Park Ridge, IL 60068

Midland Funding 8875 Aero Drive Ste. 200 San Diego, CA 92123

Nicor P.O. Box 5407 Carol Stream, IL 60197

Opportunity Financial One Prudential Plaza Chicago, IL 60601

Pathology Consultants P.O. Box 583` Michigan City, IN 46361

Pinski Dermatology 150 N. Michigan Chicago, IL 60601

Prestige Financial P.O. Box 26707 Salt Lake City, UT 84115

State Collection Service P.O. Box 6250 Madison, WI 53701

Sullivan Urgent Aid Centers Dept. 20-6001 P.O. Box 5990 Carol Stream, IL 60197

T-Mobile USA P.O. Box 53410 Bellevue, WA 98015-3410

Tidewater Credit Services P.O. Box 791137 Baltimore, MD 21279

Trustmark Recovery Services for Dr. Terry Ebert 541 Otis Bowen Drive Munster, IN 46321

USA Funds P.O. Box 6180 Indianapolois, IN

Verizon Wireless P.O. Box 26055 Minneapolis, MN 55426